## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571) 273-2885

INSTRUCTIONS. This form about he use for transmings the ISSUE FEE and PUBLICATION FEE (If required). Blocks I brough 5 should be completed where appropriate. All future correspondance including the Peterskin, obstere orders and entification of minimum fee over the nailed to the current correspondence defense as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for minimum fee for northfoliations.

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23720 7590 07/24/2009

WILLIAMS, MORGAN & AMERSON 10333 RICHMOND, SUITE 1100 HOUSTON, TX 77042

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)		
(Signature)		
(Date)		
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APPLICATION NO.	FILING DATE	FILING DATE FIRST NAMED INVENTOR ATTORNEY DOC		CONFIRMATION NO
09/752,160	12/29/2000	Merle L. Miller	2069.008400	8960
TITLE OF INVENTION:				

## METHOD AND APPARATUS FOR DC FEED

APPLN. TYPE	SMALL ENTITY	ISSUE FI	E	PUBLICATION FEE	TOTAL	FEE(S) DUE	DATE DUE
nonprovisional	rovisional NO \$1510		\$300	s	1810	10/26/2009	
EXA	MINER	ART UN	T	CLASS-SUBCLASS			
JAMAL, ALE	XANDER	2614		379-387020	_		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53).  Change of correspondence address (or Change of Correspondence Address form PTIO/SB/12) attached.  "Fee Address" indication (or "Fee Address" Indication form PTIO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the n or agents (2) the n registere 2 registe	inting on the patent front page, I, ames of up to 3 registered pate; OR, alternatively, ame of a single firm (having as d attorney or agent) and the nan red patent attorneys or agents. If annum will be printed.	nt attorneys a member a nes of up to	1_WILLIAMS 2_AMERSOI 3_	B, MORGAN & N, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ZARLINK SEMICONDUCTOR (U.S.) Inc.

ONTARIO, CA

Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🗹 Corporation or other private group entity 🖵 Government

4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed

☑ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.

☑ The Director is hereby authorized by charge the required (ee(s), or credit any overpayment, to Deposit Account Number 50-0786 Advance Order - # of Copies

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2)

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patient and Tradematic Office.

Authorized Signature /Jaison C. John/

(A) NAME OF ASSIGNEE

Date October 26, 2009

Typed or printed name Jaison C. John

Registration No. 50,737

This collection of information is equired to 37 CFR [31]. The information is equired to obtain or return a benefit by the public while is to file (each by the USPTO to present an application. Confidentially in pieceword by \$15 U.S. CI 22 and \$1 CFR [1.4]. This collection is returned to take D multi-so complete, including glatering, prepared assumining the completed application forms to the USPTO. Time well vary depending upon the individual case. Any comments on the amount of times ow exquire to complete forms and the completed application forms to the USPTO. Time well vary depending upon the individual case. Any comments on the amount of times ow exquire to complete for some analysis to strength, and the series to be complete for the formation of the complete to the complete forms of the complete forms

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